

Attn: Venus Williams

Enclosed is a signed copy of the OA
you requested. Sorry for the delay
(my plane home for Christmas left a
day earlier than I expected).

Can

part 1

~~XXXXXXXXXXXXXXXXXXXX~~

FAX RECEIVED

DEC 26 2002

GROUP 3600

OFFICIAL

FROM : _____ FAX NO. : 5096626665 Dec. 26 2002 02:33PM P2

Serial/Patent No.: 09/801,536 Mailing Date: 11/30/2002

Atty. Ref. No.: CSI001 Attorney: Cary R. Tope-Mc

Title: Truck for Skateboards

Applicant: Neil Straton

The following, due October 22, 2002 in the U.S. Patent & Trademark Office, was received in the U.S. Patent & Trademark Office Mail Room on the date stamped hereon:

Regular/Provisional Patent Application _____

including: _____

Pages of Specification, including: _____

Claims _____

_____ - page Abstract _____

Formal/Informal Drawings _____ Sheet(s) _____

☒ Transmittal Letter _____

Combined Declaration/Power of Attorney _____

Assignment with Form PTO 1595 _____

☒ Fee Calculation Sheet (2 copies) _____

Priority Document(s) _____

IDS w/Form PTO 1449 w/ _____

_____ references _____

Credit Card Payment Form for \$ _____

CERTIFICATE OF MAILING/EXPRESS MAIL NO. _____

☒ Amendment/Response _____

☒ Petition for Extension of Time (2_mths) _____

Amendment After Final Rejection _____

Preliminary Amendment _____

Letter to Official Draftsperson _____

Notice of Appeal _____

Appeal Brief _____

Issue Fee Transmittal _____

Maintenance Fee Transmittal _____

PCT Request Form _____

PCT Demand Form _____

☒ Check No. 214 for \$ 200.00 _____

Fees/Letters _____

Client Ref./Firm Ref.
3 Client Copy
2 Firm Copy
1 Accounting
1 Docketed
1 Copied For Client

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)


Application Number	09/801,536
Filing Date	03/08/2001
First Named Inventor	Straton
Group Art Unit	3618
Examiner Name	Mar
Attorney Docket Number	CS1001

Total Number of Pages in This Submission **47****ENCLOSURES (check all that apply)**


<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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Remarks

post card
payment by check**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Tope-McKay & Associates
Signature	
Date	11/30/2002

CERTIFICATE OF MAILINGI hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: **11/30/2002**

Typed or printed name	Cary Tope-McKay
Signature	
Date	11/30/2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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GROUP 3600

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PTO/SB/17 (10-01)

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**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

Complete if Known

Application Number	09/801,336
Filing Date	10/18/1999
First Named Inventor	Straton
Examiner Name	Mar
Group Art Unit	
Attorney Docket No.	CSI001

TOTAL AMOUNT OF PAYMENT (\$) 200.00

METHOD OF PAYMENT

- 1.
- ☐
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	
Deposit Account Name	

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☒ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:

☒ Check ☐ Credit card ☐ Money order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$) **200.00****2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee below	Fee Paid
Independent	20** =	X	
Multiple Dependent	3*** =	X	

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20	
102	84	202	42	Independent claims in excess of 3	
104	260	204	140	Multiple dependent claim, if not paid	
109	84	209	42	** Reissue independent claims over original patent	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$) **0.00**

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	200.00
117	920	217	450	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	260	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,260	241	640	Petition to revive - unintentional	
142	1,260	242	640	Utility issue fee (or reissue)	
143	480	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	160	126	160	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) **200.00****SUBMITTED BY**

Name (Print/Type) Cary Type-McKay

Registration No. (att./inv./agent)

41,350

Complete (if applicable)

Telephone 310.589.8158

Signature

Date 11/30/2002

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